

## STRUCTURAL PEST CONTROL BOARD

1418 HOWE AVENUE, SUITE 18, SACRAMENTO, CA 95825

**Telephone Numbers:** 

Administration Unit (916) 263-2540 Examination/Licensing/Record Storage (916) 263-2544 Complaint Unit (916) 263-2533 FAX (916) 263-2469



## **Application for** FIELD REPRESENTATIVE **Continuing Education Challenge Examination** Fee: \$10 Per Branch

Cashiering No.	License No.
Checked By	Branch
Renewal Year	Results

## PLEASE PRINT OR TYPE

Check Branch(es) in which you want to be examined:						
Branch 1	Branch 2	Branch 3	Wood Roof Cleaning & Treatment			
Check preferred examina	ation location:					
	San Bernardino		Sacramento			
Full name of person app	lying to take examination:		License Number			
Mailing Address			Expiration Date			
City	State	Zip	Telephone Number			
Company Name						
Address of Company						
City	State	Zip	Telephone Number			
Signature of Applicant			Date			